Application or Docket Number											ber			
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003 10/644417														
CLAIMS AS FILED - PART I (Column 1) (Column 2)									YTTY	OR	OTHER SMALL E			
TO	TAL CLAIMS				-		R/	ITE	FEE	.	RATE	FEE		
.50	R		NUMBER FILED .		NUMBER EXTRA		BAS	C FEE	385.00	OR	BASIC FEE	770.00		
	TAL CHARGEA	BLE CLAIMS	minus 20=		•		×	3'= 1		OR	X\$18=			
IND	EPENDENT CL	AIMS	minus 3 =		•		×	X43=		OR	X86=	:		
MULTIPLE DEPENDENT CLAIM PRESENT							41	45=		OR	+290=			
* If the difference in column 1 is less than zero, enter "0" in column 2										,	TOTAL			
CLAIMS AS AMENDED - PART II								OTHER THAN SMALL ENTITY OR SMALL ENTITY						
_8	13.04	(Column 1)	ر عصور المساور	(Column 2)		(Column 3)	SM	ALL	ENTITY	OR				
4	NE	CLAINS REMAINING AFTER		HIGH NUM PREVI	BER OUSLY	PRESENT EXTRA	R/	NTE.	AD? TIONAL PEE	\overline{h}	RATE	TIONAL FEE		
AMENDMENT	Total	• 5	Minus	PAID → 28		= .	X	9=		OR	X\$18=			
PEN	Independent	• 1	Minus	 3			1 x	13=		OR	YOC			
₹	FRAST PRESE	SENTATION OF MULTIPLE DEPENDENT CLAIM								1	000			
								45±		OR	TOTAL			
									ADDIT. FEE OR ADDIT. FEE					
	(Column 1) (Column 2)					(Column 3)			ADDI-	1		ADDI-		
AMENDMENT B	9-21-04	REMAINING AFTER AMENDMENT		NUN PREVI	BER OUSLY FOR	PRESENT EXTRA	P/	ATE	TIONAL FEE		PATE	TIONAL		
	Total	• 5	Minus	-	()·	-	X	9=		OR	X\$18=			
MEN	Independent	• (Minus	- 3		•/_	X43=			OR	X86=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM /							45= ,		OR	+290€			
·								TOTAL		OR	TOTAL			
									<u></u>	.	ÁDOIT. FEE			
<u> </u>	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST								ADO	1		ADOI-		
AMENDMENT C	•	REMAINING AFTER AMENDMENT		NUM PREVI	ABER OUSLY FOR	PRESENT EXTRA	RZ	ATE	ADDI- TIONAL FEE		RATE	TIONAL		
DAR	Total	•	Minus	**		• .	×	9=		OR	X\$18=			
Z	Independ nt	•	Minus	***		•	×	13=	 	OR	Yes	 		
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									1				
														
•	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." *** ADOIT FEE ON THIS SPACE is less than 3, enter "3." *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
	m the Trighest Nur The Trighest Nur	imber Previously Parities Previously Pa	id For (Total o	r Indepen	dend) is th	e highest numbe	r tound ir	the a	opropriate be	ex in c	olumn 1.			